

PAULA T. DOW
ATTORNEY GENERAL OF NEW JERSEY
Division of Law
124 Halsey Street, Fifth Floor
Post Office Box 45029
Newark, New Jersey 07101
Attorney for Professional Counselor
Examiners Committee of the New Jersey
State Board of Marriage and Family
Therapy Examiners

FILED

May 24 2011
STATE OF NEW JERSEY
BOARD OF MARRIAGE AND FAMILY THERAPY EXA
PROFESSIONAL COUNSELOR EXAMINERS COMM.

By: Susan C. Berger
Deputy Attorney General
(973) 648-4876

STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
PROFESSIONAL COUNSELOR EXAMINERS
COMMITTEE OF THE STATE BOARD OF MARRIAGE
AND FAMILY THERAPY EXAMINERS

IN THE MATTER OF THE SUSPENSION OR :
REVOCATION OF THE LICENSE OF :

BOBBI TRIOLO, M.A., LPC, LCADC :
License No. 37PC0003100 :

Administrative Action

TO PRACTICE PROFESSIONAL COUNSELING: :
IN THE STATE OF NEW JERSEY :

CONSENT ORDER

This matter was opened to the Professional Counselor
Examiners Committee of the New Jersey State Board of Marriage
Family Therapy Examiners (the "Committee"), upon receipt of
documentation that Ms. Triolo resigned from her employment as a
professional counselor at A Time for Change Counseling Services
after admitting that she had prepared an invoice and progress
note for an "in home" counseling therapy session with client S.D.

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STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BOARD OF MARRIAGE
& FAMILY THERAPY EXAMINERS

that did not occur in the client's home.

Respondent submitted a letter to the Committee, dated March 18, 2011 admitting that she signed an invoice and a progress note for "in home" therapy counseling services on January 2, 2011 despite not having gone to the client's home that day.

Respondent maintains that she spoke with the client by telephone on January 2, 2011. Further respondent admitted that during a December 2010 "in home" therapy counseling session she asked the client's mother to sign the paperwork for the January 2, 2011 "in home" therapy counseling session. Respondent has accepted full responsibility for her error and maintains that she has taken steps to improve her sensitivity and awareness of practices and is in the process of completing continuing education course work in ethics. Respondent submitted a resume stating that she is presently working as the Director of Clinical Specialities for the Children's Aid and Family Services.

It appears to the Committee that respondent engaged in use or employment of dishonesty, fraud, deception, misrepresentation, false promise or false pretense, in violation of N.J.S.A. 45:1-21(b) and professional misconduct, in violation of N.J.S.A. 45:1-21(e).

It appearing that respondent desires to resolve this matter without further proceedings, and the Committee, resolving this matter solely on behalf of the Professional Counselor Examiners

Committee, finding that the entry of this Consent Order adequately protects the public health, safety, and welfare, and for good cause shown;

IT IS THEREFORE, on this 24th Day of May, 2011
HEREBY ORDERED AND AGREED THAT:

1. Respondent, Bobbi Triolo is reprimanded for engaging in the use or employment of dishonesty, fraud, deception, misrepresentation, false promise or false pretense, in violation of N.J.S.A. 45:1-21(b) and professional misconduct, in violation of N.J.S.A. 45:1-21(e).

2. Respondent shall cease and desist engaging in the use or employment of dishonesty, fraud, deception, misrepresentation, false promise or false pretense, in violation of N.J.S.A. 45:1-21(b) and professional misconduct, in violation of N.J.S.A. 45:1-21(e).

3. Respondent shall provide the Committee with a written list of all entities at which she is employed, including self-employment. The list shall include the name of the entity where she is employed, the address of the premises, title and description of her duties, name of her supervisor and telephone number for the premises and her supervisor. Respondent shall have an ongoing duty to immediately (within three days) inform the Committee in writing of any change in her employment unless and until a subsequent Order relieving her of this obligation is

filed with this Committee.

4. Until further Order of the Committee, respondent shall provide a copy of this Order to all employers and/or those for whom she works as an independent contractor immediately upon commencement of employment or contract. Respondent shall be required to provide the Committee with a copy of this Consent Order (or any subsequent Order filed by the Committee) signed by each employer and/or contractor acknowledging that the employer and/or contractor has reviewed this Consent Order no later than three (3) days after the commencement of employment and/or contract.

5. Respondent shall fully and successfully complete a three credit graduate in-person (not a distance learning or internet program) course pre-approved by the Committee in professional counseling ethics. Within one year of the filing of the within Consent Order respondent shall submit an official transcript demonstrating that she fully and successfully completed the course. Failure to submit an official transcript demonstrating that respondent fully and successfully completed the ethics course, may be deemed a failure to comply with the within Order.

6. Respondent shall pay civil penalties in the amount of one thousand dollars (\$1,000.00). Payment shall be by certified check or money order payable to the Treasurer, State of New Jersey and submitted to the Executive Director, Professional

Counselor Examiners Committee, P.O. Box 45044, Newark, New Jersey
07101.

7. Failure to remit payment as required by this Order will
result in the filing of a Certificate of Debt and such other
proceedings as are permitted by law.

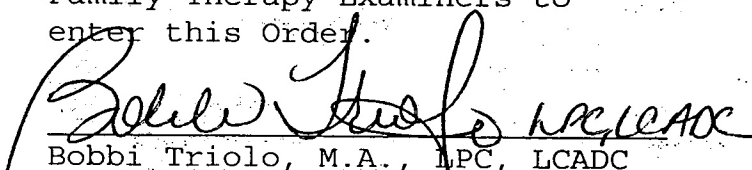
8. Respondent shall comply with all statutes and
regulations, as well as professional standards of conduct and
obligations imposed by law on professional counselors.

PROFESSIONAL COUNSELOR EXAMINERS
COMMITTEE OF THE NEW JERSEY STATE
BOARD OF MARRIAGE AND FAMILY
THERAPY EXAMINERS



By: Barbara Maurer,
Committee Chair

I have read the above order
and I understand and agree to
abide by its terms. Consent
is hereby given to the Professional
Counselor Examiners Committee of
the State Board of Marriage and
Family Therapy Examiners to
enter this Order.



Bobbi Triolo, M.A., LPC, LCADC

4/29/11
Date

Employer/Contractor

I have read the within Order.

(Print name of signator)

Name of Employer

License #

Address:

Dated: _____

Telephone #:

(Including area code and extension number)